

ANNUAL REPORT  
ON THE  
SANITARY CONDITION  
OF THE  
LONG ASHTON  
RURAL DISTRICT

*For the Year 1895.*

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# MEDICAL OFFICER'S ANNUAL REPORT

For the Year 1895.

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*To the Chairman and Members of the Long Ashton Rural  
District Council.*

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I, IMPERIAL ROAD, REDLAND

BRISTOL, January 28th, 1896.

GENTLEMEN,—

I beg to place before you my Annual Report as to the Sanitary Condition of the district during the year 1895. The calculations as to Births, Deaths, and Sickness are based on an estimated population of 26,150. In the tables bound with this Report I have also given, as required by the Local Government Board, the rates calculated on the population as shown by the census of 1891. Since the census the population of the part of Bedminster included in this district has increased by about 1,633, making an estimated population of 10,200, as against 8,567 in 1891. On the other hand, the urban district of Portishead takes away from the general population of the Union about 2,500. In the rural parishes there has been an increase in Yatton, Long Ashton, Easton-in-Gordano, and Walton-in-Gordano (by Clevedon), and a diminution, as a rule, in the

smaller villages. I have therefore in this Report made my calculations as to Births, Deaths, and Sickness on the estimated population at the present time (26,150) in order to arrive at a more accurate return than could be gained by going back to the figures of 1891.

### BIRTHS.

The Births in the year were 733 (as against 679 in 1894), giving a rate of 28.0305 per 1,000 population.

	BOYS.	GIRLS.	TOTAL.	
In Bedminster ... ..	177	154	331	} Were regis- tered.
Long Ashton District...	89	70	159	
St. George's District ...	52	60	112	
Yatton District ... ..	80	51	131	

The excess of Births over Deaths (natural increase of population) was 314.

### DEATHS.

The Deaths in the whole Union, at all ages and from all causes, were 419—the rate being 16.022 per 1,000 (in 1894 the rate was 15.72).

In the Bedminster Sub-district	...	...	129	Deaths were registered.
„ Long Ashton District	...	...	76	
„ St. George's District	...	...	74	
„ Yatton District	...	...	92	
„ Workhouse	...	...	48	
			<hr/>	
			419	

The several Parishes in each Registration District are given in Table “B.”

## INFANT MORTALITY.

In the year 733 were born, of whom 68 died under one year, giving a rate of 92·769440 per 1,000 births. This rate is more favourable than any since 1889, when it was 81·7. The rate for England in 1893 was 159, and for Stockport 225. We may take it as a rule that artificially-fed infants, where the mothers are employed at the mills, die in a proportion of two to one as against children fed naturally.

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## ZYMOTIC DISEASES.

The death-rate is 87·95 per 1,000 living (rate for 1894, 134). The deaths from Zymotic Diseases were—

From Scarlet Fever	...	...	...	7
„ Diphtheria	...	...	...	4
„ Rheumatic Fever	...	...	...	1
„ Typhoid Fever	...	...	...	3
„ Diarrhœa	...	...	...	2
„ Whooping Cough	...	...	...	6
				<hr/>
				23

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## SICKNESS.

Under the Notification of Infectious Diseases Act, 77 cases were reported to me, viz. :—

From Bedminster	...	...	...	26
„ Long Ashton District	...	...	...	11
„ St. George's District	...	...	...	16
„ Yatton District	...	...	...	21
„ Workhouse	...	...	...	3
				<hr/>
				77

(As against 148 in 1894).

The notified cases were as follows:—

Scarlet Fever	...	...	...	...	35
Diphtheria...	...	...	...	...	16
Rheumatic Fever	...	...	...	...	1
Typhoid Fever	...	...	...	...	11
Erysipelas	...	...	...	...	13
Small-pox	...	...	...	...	1

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#### SCARLET FEVER.

Although the total number of cases of Scarlet Fever was only 35, no less than seven died—five in the Bedminster Sub-Registration District, one in the Long Ashton District, and one in the St. George's District. There is no doubt, however, that a large number of cases occur of a mild character which are never seen by a medical man—possibly not recognised by the parents as an infectious malady. When a serious case appears it is often traced to other milder cases which have preceded it. If cases of Scarlet Fever appear in a locality, all milk supplied to families should be boiled, and as it is not always possible for the public to know when Scarlet Fever and other infectious diseases do prevail, it is strongly advised that milk at *all* times should be boiled before its use. Milk should also be kept in a cool and clean place, and not in a dwelling-room, or where there are meat and vegetables kept.

#### DIPHTHERIA.

Sixteen cases were notified, and of these four died (one-fourth), as against 18 notified and nine deaths in 1894 (one-half).

Two of the fatal cases occurred in the Long Ashton District, one in the Yatton District, and one in the Bedminster Sub-Registration District.



One case was notified on April 18th, at Dundry ; five at Felton (Winford) in the autumn--September 6th, 8th, 15th, November 1st, and November 7th ; and one at Dundry (four miles away) on October 22nd.

The Felton children had played together and attended school, but the source of the first case was not made out. With the exception of the Dundry case notified on October 22nd, all the houses were in an insanitary state from foul drains, dirty pig-styes, and open cess-pools. In two instances the cats were diseased, and no doubt added their quota in propagating the malady.

With regard to the case which appeared at Dundry in April, the medical man attributed the attack to the low-lying position of the house ; being often surrounded by water. The house itself was clean, and there were no insanitary conditions in the form of bad drainage, &c., and no trace of infection from a previous case.

The one case at Nailsea that proved fatal appeared in a cottage where filth in every form prevailed.

At Pill three cases appeared in January, one in May, and one in September (no fatal case). The first case was on January 8th, and the two subsequent cases in the month probably took it from this case. The first appeared in a very damp and insanitary cottage ; the next in a well-kept and very clean house ; and the third again in a very damp house, but not otherwise in a bad state. The May case appeared in a man who had come from sea a few days before, but the cottage was clean. The cause of the September case was not made out. The conditions in and around the house were not bad.

The fatal case in the Bedminster Sub-Registration District appeared at a glue manufactory, where every

precaution is taken in the way of disinfection, and where there is a remarkable record of health and longevity existing among the workmen.

The prevalence of Diphtheria in all parts of England is now engaging the attention of medical men. All are agreed that the exciting or essential cause is a micro-organism (Klebs-Löffler bacillus) and although cases appear where there are no discoverable insanitary states in the house or premises, it is proved that in the majority of cases there are palpable conditions of an unwholesome and pernicious character. It may be said that damp and dirty houses, diseased animals (especially cats and poultry), and pig-styes and drains kept in a foul state, should all be condemned. The crowded and often unventilated state of elementary schoolrooms should be considered, and where "sore throat" of any kind exists in a school the child or children should be immediately sent home and be seen by a medical man, who should give a certificate that no infection exists before re-admission to the school is permitted. A reprehensible practice, I am informed, exists in some schools of allowing the *slate* to be used by several children successively. Upon each change the slate is so-called *cleaned* with the ever-ready fingers (sometimes not too clean either), moistened with saliva eliminated from a possibly infected mouth and throat. This must be a fruitful source of infection in schools where any of the children have sore throats.

In Boston, U.S.A., so important is it considered that cases of Diphtheria and Scarlet Fever should be at once recognised in schools, that a force of fifty medical men has been appointed for the daily inspection of the schools, in which there are more than 70,000 of the most susceptible subjects in these two diseases.

## SMALL-POX.

One case (a tramp) was notified to me from the Workhouse. The man was sent to the Small-pox Hospital, and recovered.

## TYPHOID FEVER.

Eleven cases notified — three died. The cases occurred in various parts of the Union, and had no common cause, and no second case appeared in connection with any preceding one in the same locality. One case, not fatal, appeared at the Convent, Arno's Vale, probably contracted from infected linen sent to the laundry. Five cases were reported from Yatton, but at different times, and not apparently in any way associated.

## DIARRHOEA.

The deaths from Diarrhœa were two only, and not of a character to be classed as zymotic.

## WHOOPIING COUGH.

Six died. As this is not a notifiable malady in this district, I am unable to say what proportion this number bears to the total cases. The danger, as a rule, arises from exposure to cold and damp.

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The death-rate from zymotic, or so-called "preventible" diseases, were lower than in any year since 1889, partly due to the fact that no formidable epidemic prevailed, and doubtless also due to the vigilance of the medical faculty in taking prompt action. It is to be hoped, also, that the public at large are becoming more educated in sanitary laws and in acting upon them—in this, however, there is still great room for improvement.

A very considerable number of deaths among elderly and delicate persons was certainly brought about, or at least accelerated, by the excessive cold during the early months of the year, and, on the other hand, by the intense and unusual heat in the autumnal months. In the early year fatal bronchitis and pneumonia prevailed at the extreme ages of life (in very young and very old persons), and syncope and sudden failure of the heart's action accounted for the abrupt termination of life in many whose broken health had already prepared the way for an often welcome and painless end.



#### INFLUENZA.

Some deaths have been registered from Influenza, but there has been no epidemic, and some have died from one or other of the lasting injuries to the nervous system bequeathed to them from an attack sustained during the great epidemic.

#### HEART DISEASE.

Of Heart Disease 48 died—a large proportion of the total mortality. About 30,000 die annually in England of Heart Disease. The causes chiefly are hereditary influence, working in impure air, strong drink to excess, rheumatism, and the more violent exercises, such as rowing, -football, bicycling, &c., particularly to those who, having lived a sedentary life, take to athletic pursuits after middle age.

#### PHTHISIS.

Of Phthisis 21 died (20 in 1894)—a rate less than that for all England. The following advice to prevent the spread of Consumption is given by a high authority, Dr. Huggard, of Davos Platz :—

“ All cases of tubercular disease of the lungs (Consumption) take origin, directly or indirectly, from other cases. This is now an established fact. Infection, however, is easily provided against if certain simple precautions are taken. The chief modes of infection are :—

“ (1) *By inhaling dried and pulverised expectoration.*

“ This is apt to occur when an ordinary pocket-handkerchief is used by a tubercular person for expectoration. When such a handkerchief is opened, the dried expectoration is likely to be pulverised and diffused through the air. Thus it may be inhaled by others, as well as by the patient himself, who is likely to suffer from drawing diseased germs into portions of lung previously unaffected. Another source of pulverised expectoration is the habit of spitting on the ground. The expectoration becomes mixed with the dust, and then is easily carried into the air. This habit, then, is not only offensive, but dangerous.

“ (2) *By using spoons, cups, and other articles of the kind which have not been properly washed, and having been used by tubercular persons.*

“ (3) *By kissing.*

“ This source of infection is to be specially guarded against in the case of children.

“ *Self-infection* may occur, in addition to the ways mentioned, by *swallowing the expectoration*. This habit is likely to lead, sooner or later, to infection of the intestines with tubercular disease. Knowing the channels of infection, we can easily take effective *precautions*.

“ *The sputum must be destroyed and must not be allowed to become dry.* A spitting cup or flask containing just enough disinfectant solution to cover the bottom of the

vessel, should always be used for the expectoration. Out-of-doors, a pocket spitting-flask, such as Dettweller's, should be employed. Pieces of linen or calico, about 10 inches square, may also be carried. These should only be used in cases of absolute necessity, and should be burnt as soon as possible afterwards. No piece should be used more than once. *Bedrooms* that have been occupied by tubercular patients *should be thoroughly disinfected* before they are occupied by other persons, and a declaration or assurance on the point should always be demanded. If the previous occupant of the room never allowed the furniture hangings or carpet of the room to be contaminated with the sputum, there should be little need for this precaution. But as people ordinarily of cleanly personal habits sometimes show a surprising amount of ignorance or carelessness in this respect, the following points should be insisted on:— (1) Carpets, curtains, and bed-coverings should have been exposed to super-heated steam under high pressure ; (2) the floors and walls of the room should have been properly disinfected (rubbing with new bread, followed by the application of corrosive sublimate solution, is probably the most effective method). *There is no danger of infection from the breath of a tubercular patient.* The sole danger of social intercourse arises from neglect of the precaution described. Fresh air is of the highest importance for tubercular persons. Hot and stuffy rooms have an evil influence over the disease. Except in special circumstances, the bedroom window should be kept open by night as well as by day."

#### LUNG DISEASE.

Of Lung Diseases (Pleurisy, Bronchitis, and Pneumonia) 45 died, chiefly old persons and young children.



## CAUSES AFFECTING THE HEALTH OF THE DISTRICT.

Under this head I can only repeat what I have said in previous Reports. Many of the causes are certainly avoidable—for example, the management or mis-management of cess-pits, ash-heaps, and manure heaps; the dirty state in which pigs and poultry are kept, particularly in the more thickly populated parts of the district; the neglect of personal cleanliness in the house; intemperance; faulty and filthy drains, and *no* drains; overcrowding; sending infected clothes to a public laundry; insufficient supply of good water; absence of fire-places in bedrooms; living on cold and damp soils; persons partially recovered from infectious diseases attending Church or Chapel, or shops, inns, or public meetings; the neglect to destroy any books which have been used by a person suffering from infectious disease.

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## WORK DONE.

The measures taken and advice given have been directed to the removal or lessening of the evils I have mentioned. Systematic inspection has been made throughout the district, and especial and prompt attention given when required.

In infectious cases, isolation and disinfection were carried out, so far as the means at our disposal allowed. Isolation in a small cottage is next to impossible, and as there is no steam disinfectant in the district, the free use of sulphur fumes, boiling all clothing that admits of boiling, and burning that which can neither be boiled or treated with sulphur, and a thorough cleansing of walls, ceilings, floors, &c., have been the measures carried out. In a few

instances, and on special requirements, the disinfection has been done (by arrangement) by the City Sanitary Authority. There is a disinfecting chamber at the Workhouse, which does good services for cases occurring amongst the inmates. There is also an Isolation Hospital in the Workhouse field ; but cases of Small-pox are sent to the Novers Hospital, on Bedminster Down. Severe cases of infectious disease, as Scarlet Fever, are also sent to one of the Bristol Isolation Hospitals by arrangement with the Bristol Sanitary Authority.

A steam disinfector, either portable or stationary, would be of little use in a hilly district measuring 15 by 20 miles (about). It would, however, be valuable if attached to a public institution or in a densely populated area.

For the furtherance of a better water supply, wells have been closed or cleansed, and the surrounding soil removed and replaced by concrete or puddled clay. Dilapidated houses have been inspected and reported on ; action has been taken in some instances against the owners, and proceedings in other cases will be instituted shortly. Overcrowding has been attended to as much as possible. Samples of water have been from time to time analysed, and dealt with as the case required. Precautions against Cholera have been taken, and persons arriving from infected parts have been visited. No case of Cholera has appeared. The suppression of unwholesome slaughter-houses has been dealt with in a few instances, and the dairies supplying milk to the public have been visited by the Inspector and myself. When an infectious case is " notified " to me, a printed notice is immediately sent to the master and mistress of the school where the child has been attending, requesting that no other child may be allowed to attend school from the infected house.



A plan of drainage for a part of Yatton has been carried out, and measures have been taken, but as yet are not completed, for preventing the pollution of a stream from which cattle drink at Claverham. At Totterdown and Knowle a drainage scheme for that area is under the consideration by the District Council. At present about 80 houses are dependent on cess-pits.

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### WATER SUPPLY.

At Yatton and Kingston Seymour the water is unsatisfactory ; but the water supply is not so bad, taking the district as a whole, as in some instances. Many of the villages are supplied with water from the Bristol Water Company and the Portishead Company. To the upper part of Nailsea, Mr. Edgar Thatcher, of the Nailsea Heath Brewery, has for some years supplied, gratuitously, splendid water to all comers from an enormous tank near his house. The tank is kept filled by hydraulic power from a spring in the Tickenham valley. The lower part of Nailsea has been for generations so honeycombed with coal mines, now disused, that the wells have been drained, except the shallow surface wells, in which the water, as a rule, is not good. There is a natural prejudice against the use of water from the exhausted mines, but there is little doubt that by purification and aëration it might be made wholesome for drinking. Of course, if earth closets were universally used in villages, *and attended to with regularity* (and I regret to say they rarely are), good water would be much more abundant than it is. Rain water, boiled and filtered, is wholesome, but the supply, unless it is stored in large tanks, is unequal to the consumption.

The Sanitary Inspector's Report is bound up with mine. I entirely endorse what he says relating to the protection of the stream of water at Lower Walton. It is very important that it be done before the hot weather sets in. I also quite agree with him in the advice he gives as to the filter at Farleigh Backwell; now it is a constantly recurring nuisance. The Inspector has done a large amount of most useful work during the year, and I have frequently met him in consultation. His punctuality in answering letters and in promptly attending to my suggestions, greatly facilitates the sanitary duties devolving upon us.

I am, GENTLEMEN,

Yours obediently,

GEORGE ADAMS,

*Medical Officer of Health.*



*To the Chairman and Members of the Long Ashton  
District Council.*

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GENTLEMEN,—

In again making my Annual Report, I have the honour to inform you that during the past year I have visited and inspected 171 houses in my district, and in almost every case where a nuisance has been found to exist my notice to abate it has been attended to, but in a few cases I have had to request your Clerk to write sharply to the defaulters, which he has done, and the result has been that the requirements of my notice have been carried out without further proceedings having to be taken.

A number of new closets and cess-pools have been built where required, and old ones repaired.

In two or three cases new drains have been put in, viz., at Dundry, Winford, and Yatton. The nuisance to the Railway Hotel at Yatton, caused by the slop-water from the Railway Inn, is not yet effectually dealt with.

The dangerous nuisance from Messrs. Cox's tannery still continues, notwithstanding the heavy outlay to abate it to which they have been put.

There is a nuisance at Bedminster Down caused by persons throwing ashes and vegetable refuse on the waste land opposite their houses. I would suggest that a scavenger for this drainage district be employed twice a week to collect and remove all this nuisance.

\* There have been several new lamps put in Knowle and Totterdown in the new streets, as well as alterations made in the position of present ones in the old streets, and are giving satisfaction.

Some defective drains in Knowle and Totterdown have been repaired, and are now in proper order.

There has been a large number of cases of Scarlet and Typhoid Fever in the district, as well as Diphtheria. The houses have been disinfected in all the cases as soon as the Medical Officer in attendance has informed me it was proper for me to do it.

The scheme for the supply of water to Lower Walton is still under consideration by the inhabitants. It should be carried out with as little delay as possible.

The filter at Farleigh Backwell has again been out of order. I have had it attended to, and at present it is working properly ; but in my opinion nothing but a new cess-pool, built perfectly watertight, will effectually remedy the matter. If Mr. Gibbs would allow one to be built on his land at the head of filter, the present one might be destroyed ; it is, and always must be, a nuisance in its present site.

I am, GENTLEMEN,

Your obedient Servant,

ROBT. S. MARSH,

*Inspector.*

Nailsea, 31st January, 1896.







K<sup>2</sup> 3.  
(A)

TABLE of **DEATHS** during the Year 1895 in the LONG ASHTON RURAL DISTRICT, classified according to DISEASES, AGES, and LOCALITIES.

Names of Localities adopted for the purpose of these statistics: public institutions being shown as separate localities.	MORTALITY FROM ALL CAUSES AT SUBJOINED AGES.								MORTALITY FROM SUBJOINED CAUSES, DISTINGUISHING DEATHS OF CHILDREN UNDER FIVE YEARS OF AGE.																	
	AT ALL AGES	Under 1 year	1 and under 5	5 and under 15	15 and under 25	25 and under 65	65 and upwards		Smallpox	Scarletina	Diphtheria	Membranous Croup	FEVERS.			Measles	Whooping Cough	Diarrhoea and Dysentery	Rheumatic Fever	Phthisis	Bronchitis, Pneumonia & Pleurisy	Heart disease	Injuries		All other diseases	TOTAL
													Typhus	Enteric or Typhoid												
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)		
BEDMINSTER REGISTRATION SUB-DISTRICT.....}	119	36	14	1	6	33	29	Under 5			1						1			5			43	50	Population in 1891—8,567. Area in Acres—2,735. General Death Rate—11·66 per 1,000 population. Infant Death Rate—108·76 per 1,000 births registered.	
								5 upw'ds							1			1	5	9	9	2	42	69		
Novers Hospital.....	5	4	1				Under 5		4														4			
							5 upw'ds		1														1			
Refuge, Arno's Vale.....	5				2	3		Under 5																		
								5 upw'ds											1		1		3	5		
TOTALS .....	129	36	18	2	8	36	29	Under 5		4	1						1			5			43	129		
								5 upw'ds		1									1	6	9	10	2	45		

The subjoined numbers have also to be taken into account in judging of the above records of mortality.

Deaths occurring outside the district among persons belonging thereto.....								Under 5																	
								5 upw'ds																	
Deaths occurring within the district among persons not belonging thereto.....								Under 5		4															
								5 upw'ds		1															

TABLE of **DEATHS** during the Year 1895 in the LONG ASHTON REGISTRATION DISTRICT.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	
LONG ASHTON REGISTRATION DISTRICT .....	76	11	8	2	3	15	37	Under 5		1	2					6	1			6			3	19	Population in 1891—6,835. Area in Acres—19,230. General Death Rate—18·14 per 1,000 population. Infant Death Rate—83·96 per 1,000 births registered.
								5 upw'ds						1					2	6	5	3	40	57	
Workhouse .....	48							Under 5																	
								5 upw'ds												5	2		41	48	
TOTALS .....	124	11	8	2	3	15	37	Under 5		1	2					6	1			6			3		
								5 upw'ds						1					2	11	7	3	81	124	

TABLE of **DEATHS** during the Year 1895 in the ST. GEORGE'S REGISTRATION DISTRICT.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	
ST. GEORGE'S REGISTRATION DISTRICT .....	74	6	3	1	2	28	34	Under 5		1							1			1			6	9	Population in 1891—6,981. Area in Acres—12,186. General Death Rate—10·60 per 1,000 population. Infant Death Rate—53·57 per 1,000 births registered.
								5 upw'ds											8	3	18		36	65	
TOTALS .....	74	6	3	1	2	28	34	Under 5		1							1			1			6		
								5 upw'ds											8	3	18		36	74	

TABLE of **DEATHS** during the Year 1895 in the YATTON REGISTRATION DISTRICT.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)	(21)	(22)	(23)	(24)	(25)	
YATTON REGISTRATION DISTRICT .....	92	10	8	2	7	25	40	Under 5												4			14	18	Population in 1891—4,634. Area in Acres—11,503. General Death Rate—19·85 per 1,000 population. Infant Death Rate—76·33 per 1,000 births registered.
								5 upw'ds			1								6	6	10	2	49	74	
TOTALS .....	92	10	8	2	7	25	40	Under 5												4			14		
								5 upw'ds			1								6	6	10	2	49	92	





(B) TABLE of POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the Year 1895, in the LONG ASHTON RURAL DISTRICT, classified according to Diseases, Ages, and Localities.

Names of Localities adopted for the purpose of these statistics; public institutions being shown as separate localities.	POPULATION AT ALL AGES.		Registered Births	Aged under 5 or over 5	NEW CASES OF SICKNESS IN EACH LOCALITY, COMING TO THE KNOWLEDGE OF THE MEDICAL OFFICER OF HEALTH.													TOTALS.	TREATED IN ISOLATION HOSPITAL.			
	Census, 1891	Estimate to middle of 1895			Smallpox	Scarletina	Diphtheria	Membranous Croup	FEVERS.					Cholera	Erysipelas	Diarrhoea			Smallpox	Scarletina	Typhus fever	
									Typhus	Enteric or Typhoid	Continued	Relapsing	Puerperal									
(A)	(B)	(C)	(D)	(E)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)		(1)	(2)	(3)	(4)
BEDMINSTER REGISTRATION SUB-DISTRICT.....	8567	10200	331	Under 5		11	2									1		14		5		
				5 upw'ds		6	1			3					2				10		2	
Refuge, Arno's Vale.....	Varies			Under 5																		
				5 upw'ds						2				2			4					
Novers Hospital.....	Varies			Under 5																		
				5 upw'ds																		
TOTAL.....	8567	10200	331	Under 5		11	2									1		14		5		
				5 upw'ds		6	1			5				4			14		2			

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The NOVERS ISOLATION HOSPITAL is on Bedminster Down. It has 26 beds. An arrangement has been made that it shall be used as a Smallpox Hospital—cases occurring in Bristol and in this Sanitary District being admitted. The Hospital is used for other infectious cases when there is no Smallpox.

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TABLE of POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the Year 1895, in the LONG ASHTON DIVISION of the LONG ASHTON RURAL DISTRICT.

(A)	(B)	(C)	(D)	(E)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)		(1)	(2)	(3)	(4)	
LONG ASHTON, comprising the Parishes of—																							
Long Ashton .....																							
Backwell .....										1								1					
Workhouse .....					1										3			4					
Barrow Gurney .....	6835	Slight increase	159			1												1					
Dundry.....							2											2					
Flax Bourton .....							6											6					
Winford .....								6										6					
Wraxall .....						3												3					
TOTALS .....	6835	Same	159		1	4	8			1					3			17					

An ISOLATION HOSPITAL was erected in March, 1893, in a field adjoining the Workhouse. It has 12 beds.

TABLE of POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the Year 1895, in the ST. GEORGE'S DIVISION of the LONG ASHTON RURAL DISTRICT.

(A)	(B)	(C)	(D)	(E)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)		(1)	(2)	(3)	(4)	
ST. GEORGE'S DISTRICT, comprising the Parishes of—																							
Abbot's Leigh.....															1			1					
Clapton.....																							
Easton-in-Gordano.....	6981	Slight increase	112			7	5											12					
Portbury .....						2				1								3					
Walton-in-Gordano .....																							
Weston-in-Gordano .....																							
TOTALS .....	6981	Same	112			9	5			1					1			16					

No ISOLATION HOSPITAL within the Division.

TABLE of POPULATION, BIRTHS, AND OF NEW CASES OF INFECTIOUS SICKNESS, coming to the knowledge of the Medical Officer of Health, during the Year 1895, in the YATTON DIVISION of the LONG ASHTON RURAL DISTRICT.

(A)	(B)	(C)	(D)	(E)	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)		(1)	(2)	(3)	(4)	
YATTON DISTRICT, comprising the Parishes of—																							
Yatton .....										4					2			6					
Nailsea .....							1								3			4					
Kenn.....	4639	Slight increase	131			3	1											4					
Tickenham .....						2												2					
Brockley .....																							
Kingston Seymour.....															1			1					
TOTALS .....	4639	Same	131			5	2			4					6			17					

No ISOLATION HOSPITAL within the Division.

State here whether "Notification of Infectious Disease" is compulsory in the District.—Yes. Since when?—June 8th, 1891.





